

S&H Form: (02/05)

REPLY/AMENDMENT FEE TRANSMITTAL

Signature

Attorney Docket No. 1789.1040CIP

Application Number 10/644,220

Filing Date August 21, 2003

First Named Inventor Shinya MYOJIN, et al.

Group Art Unit 1742

Exemples Name ID Situin

Date

FEE TRANSMITTAL					Shinya MYOJIN, et al.							
			First Named Inventor									
				Group Art Unit		1742						
AMOUNT ENCLOSED 0.00				Examiner Name		IP,	IP, Sikyin					
FEE CALCULATION (fees effective 12/08/04)												
Litishoot Number Number												
CLAIMS AS Claims Remaining AMENDED After Amendment		Previously	Paid For Extra			Rate		Calculations \$ 0.00				
TOTAL CLAIMS	11		-	20 =	0		X \$ 50.00 = X \$ 200.00 =		0.00			
INDEPENDENT CLAIMS	2		- 3=		0				- 0.00			
Since an Official Action set an <u>original</u> due date of <u>March 19, 2006</u> , extended to <u>March 20, 2006</u> under 37 CFR 1.7 since March 19, 2006 is a Sunday, petition is hereby made for an extension to cover the date this reply is filed for which the requisite fee is enclosed (1 month (\$120)); (2 months (\$450)); (3 months (\$1,020)); (4 months (\$1,590)); (5 months (\$2,160)):												
Kalestics of Appeal is enclosed, add (\$500.00)												
If Statutory Disclaimer under Rule 20(d) is enclosed, add fee (\$130.00)												
Information Disclosure Statement (Rule 1.17(p)) (\$180.00)									\$	0.00		
Total of above Calculations =									<u> </u>			
Reduction by 50% for filing by small entity (37 CFR 1.9, 1.27 & 1.28)									\$	0.00		
TOTAL FEES DUE = (1) If entry (1) is less than entry (2), entry (3) is "0".												
(1) If entry (1) is less than entry (2), entry (3) is 0. (2) If entry (2) is less than 20, change entry (2) to "20".												
(4) If entry (4) is less than entry (5), entry (6) is "O".												
(5) if entry (5) is less than 3, change entry (5) to "3".												
METHOD OF PAYMENT												
☐ Check enclosed as payment.												
Charge "TOTAL FEES DUE" to the Deposit Account No. below.											•	
No paym	No payment is enclosed.											
GENERAL AUTHORIZATION												
any ove	If the above-noted "AMOUNT ENCLOSED" is not correct, the Commissioner is hereby authorized to credit any overpayment or charge any additional fees necessary to:											
Deposit Account No. 19-3935												
Deposit Account Name STAAS & HALSEY LLP STAAS & HALSEY LLP											under	
Deposit Account Name STAAS & HALSET ECT. The Commissioner is also authorized to credit any overpayments or charge any additional fees required under 37 CFR 1.16 (filing fees) or 37 CFR 1.17 (processing fees) during the prosecution of this application, including any related application(s) claiming benefit hereof pursuant to 35 USC § 120 (e.g., any related applications/divisionals/CIPs under 37 CFR 1.53(b) and/or continuations/divisionals/CPAs under 37 CFR 1.53(d)) to maintain pendency hereof or of any such related application.												
SUBMITTED BY: STAAS & HALSEY LLP Reg. No. 34									57			
Typed Name Darleen J. Stockley									1	1 60		